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**\*BIBDATASHEET\*****CONFIRMATION NO. 2326**

Bib Data Sheet

SERIAL NUMBER 09/627,237	FILING DATE 07/27/2000  RULE	CLASS 375	GROUP ART UNIT 2631	ATTORNEY DOCKET NO. PHA 23,836
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## APPLICANTS

Srihari Adireddy, Ithaca, NY;

Lang Tong, Ithaca, NY;

\*\* CONTINUING DATA \*\*\*\*\* *Yes*

This application is a CIP of ~~09/466,403~~ ~~12/17/1999~~ ~~ADN~~ CLAIMS PRIORITY BENEFIT OF  
 60/165,321 filed 11/12/99

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NO*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/13/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>pplm</i> Initials	STATE OR  COUNTRY NY	SHEETS  DRAWING 5	TOTAL  CLAIMS 23	INDEPENDENT  CLAIMS 3
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## ADDRESS

PHILIPS ELECTRONICS NORTH AMERICAN CORP.  
 580 WHITE PLAINS RD  
 TARRYTOWN, NY  
 10591

## TITLE

System and methods for precursor cancellation of intersymbol interference in a receiver

FILING FEE  RECEIVED 744	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/627,237	<b>FILING DATE</b> 07/27/2000 <b>RULE</b> -	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2745	<b>ATTORNEY DOCKET NO.</b> PHA 23,836
<b>APPLICANTS</b> Srihari Adireddy, Ithaca, NY ; Lang Tong, Ithaca, NY ;  <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 09/466,403 12/17/1999  <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 09/13/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 23
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b>  Laurie E Gathman c/o U S Philips Corporation Intellectual Property Department 580 White Plains Road Tarrytown ,NY 10591				
<b>TITLE</b> System and methods for precursor cancellation of intersymbol interference in a receiver				
<b>FILING FEE RECEIVED</b> 744	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

*Nixon Dies  
26.3  
375/240*

*Wrong data  
see Prelim Amndt.*